Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Carol First name A Middle name Hertenstein Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3738	

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Debtor 1 Carol A Hertenstein Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	300 Columbia Drive Unit 1205	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Brevard County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Deb	otor 1 Carol A Hertenstei	in			_	Case numbe	r (if known)	
Par	t 2: Tell the Court About	our Bank	ruptcy Cas	e				
7.	The chapter of the Bankruptcy Code you are			ief description of each, see N_{0} to the top of page 1 and ch			42(b) for Individuals Filii	ng for Bankruptcy
	choosing to file under	■ Chapt	er 7					
		☐ Chapt	er 11					
		☐ Chapt	er 12					
		☐ Chapt	er 13					
8.	How you will pay the fee	abo ord	out how you	entire fee when I file my per may pay. Typically, if you ar ttorney is submitting your pa ddress.	e paying the fe	ee yourself, you m	ay pay with cash, cashie	er's check, or money
		☐ Ine	ed to pay	the fee in installments. If yo		option, sign and a	ttach the Application for	Individuals to Pay
			•	in Installments (Official Form	,	ention only if you o	ero filing for Chapter 7. P	v low o judgo mov
		but	is not requi	my fee be waived (You may ired to, waive your fee, and n	nay do so only	if your income is I	ess than 150% of the of	ficial poverty line that
				family size and you are una to Have the Chapter 7 Filing				
				,		`	, , ,	
9.	Have you filed for	■ No.						
	bankruptcy within the last 8 years?							
	iast o years:	☐ Yes.	District		When		Case number	
			District		When		Case number	
			District		When		Case number	
			Biotriot					
10	Are any bankruptcy							
10.	cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to you	
			District		When		Case number, if known	
			Debtor				Relationship to you	
			District		When		Case number, if known	
								_
11.	Do you rent your residence?	■ No.	Go to lin	ie 12.				
		☐ Yes.	Has you	r landlord obtained an eviction	n judgment ag	gainst you?		
			_ ı	No. Go to line 12.				
				Yes. Fill out <i>Initial Statement</i> his bankruptcy petition.	About an Evic	tion Judgment Aga	ainst You (Form 101A) a	nd file it as part of

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Deb	otor 1 Carol A Hertenste	ein			Case number (if known)			
Dor	t 3: Report About Any Bu		Vau Our	aa a Sala Dramiisi	•••			
		1511162262	Tou Own	as a Sole Proprie	101			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to F	Part 4.				
		☐ Yes.	Name	and location of bus	iness			
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any				
	If you have more than one sole proprietorship, use a		Numbe	er, Street, City, Stat	te & ZIP Code			
	separate sheet and attach it to this petition.		Check	the appropriate bo	ox to describe your business:			
					ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you incomes, cash-flo	dicate that you are w statement, and f)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of dederal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	No.	I am not filing under Chapter 11.					
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	I am fil	ing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	· Have Any	y Hazardou	us Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any property that poses or is	■ No.						
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is th	ne hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			ate attention is why is it needed?				
	For example, do you own							
	perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?				
	urgent repairs?				Number, Street, City, State & Zip Code			

Debtor 1 Carol A Hertenstein

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Del	otor 1 Carol A Hertenste	in		Case nu	ımber (if known)
Par	t 6: Answer These Quest	ions for R	eporting Purposes		
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are sonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		ousiness debts? Business debts are deestment or through the operation of the	
			☐ No. Go to line 16c.	5 1	
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or bus	siness debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	r 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	Yes.		Do you estimate that after any exempt vailable to distribute to unsecured credi	property is excluded and administrative expenses tors?
	administrative expenses		■ No		
	are paid that funds will be available for		□Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	□ 25,001-50,000
	you estimate that you owe?	☐ 50-99		5 001-10,000	5 0,001-100,000
	0110.	☐ 100-1		□ 10,001-25,000	☐ More than100,000
		□ 200-9	99		
19.	How much do you estimate your assets to	□ \$0 - \$		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million	
20.	How much do you	□ \$0 - \$	50.000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
	to be:		001 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion
		□ \$500,	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	t7: Sign Below				
For	you	I have ex	amined this petition, and I de	eclare under penalty of perjury that the i	nformation provided is true and correct.
				7, I am aware that I may proceed, if elig relief available under each chapter, and	gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.
				not pay or agree to pay someone who he notice required by 11 U.S.C. § 342(b	is not an attorney to help me fill out this).
		I request	relief in accordance with the	chapter of title 11, United States Code,	specified in this petition.
		bankrupt and 357	cy case can result in fines up		ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Carol A	Hertenstein e of Debtor 1	Signature of D	ebtor 2
		Executed	on March 26, 2019	Executed on	
			MM / DD / YYYY		MM / DD / YYYY

	Case 6:19-bk-01933-CCJ	Filed 03/26/19	Page / 01 52
Debtor 1 Carol A Hertens	tein	Cas	e number (if known)
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		ates Code, and have e have delivered to the o	explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
to me una page.	/s/ Lan Kennedy-Davis, Esq. Signature of Attorney for Debtor	Date	March 26, 2019 MM / DD / YYYY
	Lan Kennedy-Davis, Esq.		
	Rumberger Kirk & Caldwell, P.A.		
	300 S, Orange Ave 14th Floor		
	Orlando, FL 32801 Number, Street, City, State & ZIP Code		
	Contact phone 407-839-4576	Email address	Ikennedy@rumberger.com

534021 FL Bar number & State

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		Ouse 0.10	DK 01300 000	D001 1 1100 00/20/	10 rage our	02	
Fill	in this inforr	nation to identify your	case:				
Deb	otor 1	Carol A Hertensto	Middle Name	Last Name			
	otor 2						
(Spo	use if, filing)	First Name	Middle Name	Last Name			
Uni	ted States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF F	FLORIDA			
	se number _					□ Choo	k if this is an
(II KII	iowii)					_	k if this is an nded filing
		<u>rm 106Sum</u>					
				d Certain Statistica			12/15
info	rmation. Fill	out all of your schedul	es first; then complete the	e information on this form. If the box at the top of this pag	you are filing amend		
Par	t 1: Summ	arize Your Assets					
						Your a	assets of what you own
1.	Schedule A	VB: Property (Official F	orm 106A/B)				
••						\$	364,140.00
	1b. Copy lin	e 62, Total personal pro	perty, from Schedule A/B			\$	60,030.00
	1c. Copy lin	e 63, Total of all propert	y on Schedule A/B			\$	424,170.00
Par	t 2: Summ	arize Your Liabilities					
						Your I	iabilities
						Amour	nt you owe
2.			laims Secured by Property omn A, Amount of claim, at the	(Official Form 106D) ne bottom of the last page of Pa	art 1 of Schedule D	\$	399,369.00
3.			Unsecured Claims (Official	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	•	\$	0.00
				aims) from line 6j of <i>Schedule Li</i>		\$ \$	58,377.00
	ов. Оору ш	ic total claims from Fart	2 (nonphonty unsecured cit	anns) nom me oj or ochedule i	_//	Ψ <u> </u>	30,377.00
					Your total liabilities	\$	457,746.00
Par	t 3: Summ	arize Your Income and	l Fynenses				
			•				
4.		Your Income (Official Formation Formation) Combined monthly income		1		\$	2,360.80
5.	Schedule J: Copy your n	Your Expenses (Officia monthly expenses from li	l Form 106J) ne 22c of <i>Schedule J</i>			\$	3,386.00
Par	t 4: Answe	er These Questions for	Administrative and Statis	tical Records			
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. Ch	eck this box and submit this fo	rm to the court with you	ur other sc	hedules.
7.	■ Yes What kind	of debt do you have?					
				ebts are those "incurred by an ignormal for statistical purposes. 28 U.		a personal	, family, or
		lebts are not primarily urt with your other sched		e nothing to report on this part	of the form. Check this	box and s	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Carol A Hertenstein Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		C	ase o).19-DK-(J1933-C() DOC	1 Fileu 03/20	0/19	Page	10 01 52		
Fill	in this informa	ation to i	dentify	your case a	and this filing	g:						
Deb	otor 1	Carol	A Hert	enstein								
D . I	0	First Nam	ie		Middle Name		Last Name					
	otor 2 ouse, if filing)	First Nam	ie		Middle Name		Last Name					
Unit	ted States Bank	kruptcv C	ourt for	the: MIDE	OLE DISTRIC	T OF FLORID	DA .					
		., .,										
Cas	se number						_					Check if this is an amended filing
Sc In ea think infor	tit fits best. Be	parately li as complespace is r	st and de	ropert escribe items accurate as p	s. List an asset	married peop	an asset fits in more tha le are filing together, bo he top of any additional	oth are ed	qually respo	onsible for su	the c	ng correct
Part	Describe Ea	ach Resid		_			wn or Have an Interest I					
_	_		jai or eq	uitable intere	est in any resid	ience, builaing	g, iand, or similar proper	rty?				
	No. Go to Part 2											
	Yes. Where is t	he proper	:y?									
1.1					What	t is the propert	ty? Check all that apply					
	300 Columb Unit 1205	oia Driv	е			Single-family	home					or exemptions. Put
	Street address, if a	available, or	other des	cription	— □ ■		ulti-unit building n or cooperative					ns on Schedule D: cured by Property.
						Manufacture	d or mobile home		Current val	ue of the	Cu	rrent value of the
	Cape Canav	veral	FL	32920-00	000 🗆	Land			entire prop	erty?		tion you own?
	City		State	ZIP Cod	le 🔲		roperty	=	\$14	4,140.00		\$144,140.00
						Other						wnership interest by the entireties, or
					Who	has an interes	st in the property? Check			e), if known.	uncy	
					_	,		_				
	Brevard											
	Journey						Debtor 2 only of the debtors and another	۵r		if this is con	nmuni	ty property
							you wish to add about th		•	,		
					prop	erty identificat	tion number:					

Official Form 106A/B Schedule A/B: Property page 1

1.2 	f you own or h	ave more				
1.2 	,		than one. lis	st here:		
_				What is the property? Check all that apply		
3	11024 Windchir			Single-family home		d claims or exemptions. Put
	Street address, if availab	oie, or other des	scription	Duplex or multi-unit building		cured claims on Schedule D: Claims Secured by Property.
				Condominium or cooperative		
(Clermont	FL	34711-000	0 ☐ Land	Current value of the entire property?	Current value of the portion you own?
C	City	State	ZIP Code	Investment property	\$220,000.0	0 \$220,000.00
				☐ Timeshare	Describe the nature	of your ownership interest
				Other	(such as fee simple,	tenancy by the entireties, or
				Who has an interest in the property? Check Debtor 1 only	one a life estate), if know	n.
L	Lake			Debtor 2 only		
C	County			Debtor 1 and Debtor 2 only	Check if this is	community property
				At least one of the debtors and another		property
				Other information you wish to add about the property identification number:	nis item, such as local	
				This property is under a short sal	e contract.	
	ages you have at	tached for		n for all of your entries from Part 1, including that number here		\$364,140.00
■ Y						
■ Y	∕es	a		Who has an interest in the property? Check one	Do not deduct secure	ed claims or exemptions. Put
_	Make: Mazda	a		Who has an interest in the property? Check one	the amount of any se	cured claims on Schedule D:
■ Y	Make: Mazda Model: CX5	a		■ Debtor 1 only	the amount of any se Creditors Who Have	cured claims on Schedule D: Claims Secured by Property.
■ Y	Make: Mazda		10000	■ Debtor 1 only □ Debtor 2 only	the amount of any se Creditors Who Have Current value of the	cured claims on Schedule D: Claims Secured by Property. Current value of the
■ Y	Make: Mazda Model: CX5 Year: 2018		10000	■ Debtor 1 only	the amount of any se Creditors Who Have	cured claims on Schedule D: Claims Secured by Property.

Official Form 106A/B Schedule A/B: Property page 2

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De	ebtor 1	Carol A Her	tenstein	Case number ((if known)	
6.	<i>Exampl</i> □ No		furnishings nces, furniture, linens, china, kitchenware			
	■ Yes.	Describe				
			used furniture			\$500.00
7.	□No	es: Televisions	and radios; audio, video, stereo, and digital equipme Il phones, cameras, media players, games	nt; computers, printers, scanners;	; music collec	tions; electronic devices
			used tv, audio and computers			\$500.00
8.	Exampl		d figurines; paintings, prints, or other artwork; books, ions, memorabilia, collectibles	pictures, or other art objects; star	mp, coin, or t	aseball card collections;
			used fur and minimal jewelry			\$500.00
	Firearn Examp ■ No □ Yes. Clothe Examp	oles: Pistols, rifle Describe s	es, shotguns, ammunition, and related equipment lothes, furs, leather coats, designer wear, shoes, acc	cessories		
			used clothing			\$50.00
12.	□ No		ewelry, costume jewelry, engagement rings, wedding	rings, heirloom jewelry, watches	, gems, gold,	silver \$200.00
				<u> </u>		
13.	Examp ■ No	rm animals oles: Dogs, cats, Describe	birds, horses			
	□ No	her personal ar	nd household items you did not already list, inclu	iding any health aids you did n	ot list	
						#000 00
			photographic equipment and firearms			\$200.00

Official Form 106A/B Schedule A/B: Property

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Debtor 1	Carol A Hertenstein	1	Case number (if known)
			including any entries for pages you have attached	\$1,950.00
Part 4: D	escribe Your Financial Asse	ts		
		equitable interest in any o	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	nples: Money you have in y	our wallet, in your home, ir	n a safe deposit box, and on hand when you file your peti	tion
			Cash	\$40.00
Exan		ave multiple accounts with t	certificates of deposit; shares in credit unions, brokerage the same institution, list each. Institution name:	houses, and other similar
	17.1.	Checking Acct No. 0713713347212	Suntrust	\$40.00
■ No □ Yes 19. Non-	······	Institution or issuer name	ge firms, money market accounts : d and unincorporated businesses, including an intere	st in an LLC, partnership, and
■ No				
⊔ Yes	s. Give specific information Na	nabout them me of entity:	% of ownership:	
Nego Non-	otiable instruments include	personal checks, cashiers'	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
■ No □ Yes	s. Give specific information Iss	about them uer name:		
Exan □ No -		SA, Keogh, 401(k), 403(b).	, thrift savings accounts, or other pension or profit-sharing	j plans
■ Yes	s. List each account separa Type	tely. of account:	Institution name:	
	4011	(401K with Orlando Health Fidelity Investments	\$32,000.00
Your <i>Exan</i>		its you have made so that y	you may continue service or use from a company e utilities (electric, gas, water), telecommunications compa	anies, or others
■ No □ Yes	i		Institution name or individual:	
		odic payment of money to v	ou, either for life or for a number of years)	

Official Form 106A/B Schedule A/B: Property page 4

■ No

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De	ebtor 1	Carol A Herte	enstein	Case number (if known)	
	☐ Yes	Issu	uer name and description.		
24.			n IRA, in an account in a qualified ABLE program, or (29A(b), and 529(b)(1).	under a qualified state tuition prograr	n.
	☐ Yes	Inst	titution name and description. Separately file the records	of any interests.11 U.S.C. § 521(c):	
	■ No	•	ure interests in property (other than anything listed in	line 1), and rights or powers exercise	able for your benefit
			rmation about them		
26.			demarks, trade secrets, and other intellectual propert ain names, websites, proceeds from royalties and licensin		
	☐ Yes.	Give specific infor	rmation about them		
27.	Examp ■ No	les: Building perm	nd other general intangibles hits, exclusive licenses, cooperative association holdings,	liquor licenses, professional licenses	
	☐ Yes.	Give specific infor	rmation about them		
M	oney or p	property owed to	o you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to yo	u		
	■ No □ Yes. 0	Give specific infor	mation about them, including whether you already filed th	e returns and the tax years	
				, , , , , , , , , , , , , ,	
29.	_ `		ump sum alimony, spousal support, child support, mainter	nance, divorce settlement, property settl	ement
	■ No □ Yes. 0	Give specific infor	mation		
30.			ne owes you s, disability insurance payments, disability benefits, sick p aid loans you made to someone else	pay, vacation pay, workers' compensation	on, Social Security
		Give specific infor	rmation		
31.		ts in insurance p les: Health, disabi	policies ility, or life insurance; health savings account (HSA); cred	lit, homeowner's, or renter's insurance	
		Name the insuran	ce company of each policy and list its value.	5 (1)	
			Company name:	Beneficiary:	Surrender or refund value:
32.	If you a	erest in property are the beneficiary ne has died.	that is due you from someone who has died of a living trust, expect proceeds from a life insurance po	olicy, or are currently entitled to receive p	property because
	■ No □ Yes	Give specific info	rmation		
	— 103.	Olve specific fillor	maion.		
33.			rties, whether or not you have filed a lawsuit or made nployment disputes, insurance claims, or rights to sue	a demand for payment	
	_	Describe each cla	aim		
34.	Other c	ontingent and ur	nliquidated claims of every nature, including countere	claims of the debtor and rights to set	off claims
	■ No □ Yes.	Describe each cla	aim		
	55.				

Official Form 106A/B Schedule A/B: Property page 5

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Debto	Carol A Hertenstein		Case number (if known)	
35. A ı	ny financial assets you did not already list			
	Yes. Give specific information			
	Add the dollar value of all of your entries from Part 4, includin or Part 4. Write that number here			\$32,080.00
Part 5	Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real esta	ite in Part 1.	
37. Do	you own or have any legal or equitable interest in any business-relate	ed property?		
	o. Go to Part 6.			
ПΥ	es. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. D o	you own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
	you have other property of any kind you did not already list	?		
	xamples: Season tickets, country club membership			
_				
П	Yes. Give specific information			
54. <i>I</i>	add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55. F	Part 1: Total real estate, line 2			\$364,140.00
56. F	Part 2: Total vehicles, line 5	\$26,000.00	_	· · · · · · · · · · · · · · · · · · ·
57. F	Part 3: Total personal and household items, line 15	\$1,950.00		
58. F	Part 4: Total financial assets, line 36	\$32,080.00		
59. F	Part 5: Total business-related property, line 45	\$0.00		
60. F	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. F	Part 7: Total other property not listed, line 54 +	\$0.00		
62. 1	otal personal property. Add lines 56 through 61	\$60,030.00	Copy personal property total	\$60,030.00
63.	otal of all property on Schedule A/B. Add line 55 + line 62			\$424,170.00

Official Form 106A/B Schedule A/B: Property page 6

		Case 6:19-bk	-01933-CCJ Do	c 1 Filed 03/26/19	Page	16 of 52	
Fil	l in this informa	ation to identify your cas	e:				
	ebtor 1	Carol A Hertenstein					
De	ebtor 2	First Name	Middle Name	Last Name			
(Sp	ouse if, filing)	First Name	Middle Name	Last Name			
Un	nited States Banl	kruptcy Court for the: N	IIDDLE DISTRICT OF FLO	RIDA			
	ase number					_	heck if this is an mended filing
	fficial For		erty You Cla	nim as Exempt			4/16
rhe need cass For specially fundered	property you list eded, fill out and e number (if kno each item of pecific dollar am applicable sta ds—may be un emption to a pa	ted on Schedule A/B: Propattach to this page as manown). roperty you claim as executed as executed as exempt. Alternatitutory limit. Some exemplimited in dollar amount.	erty (Official Form 106A/B) ny copies of Part 2: Addition mpt, you must specify th ively, you may claim the fotions—such as those for However, if you claim an	g together, both are equally responsively as your source, list the property the property the property of the property. On the top the amount of the exemption you full fair market value of the proper health aids, rights to receive of the exemption of 100% of fair markety is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed that a second to the property is determined to exceed the property is determined to exceed the property is determined to exceed that a second to the property is determined to exceed the property is determ	claim. Certy being certain being	claim as exemped additional page one way of doing exempted enefits, and take a under a law	pt. If more space is es, write your name and bing so is to state a up to the amount of ex-exempt retirement that limits the
Pa	rt 1: Identify	the Property You Claim	as Exempt				
1.	Which set of e	exemptions are you clain	ning? Check one only, eve	n if your spouse is filing with you.			
	You are clai	ming state and federal nor	bankruptcy exemptions.	11 U.S.C. § 522(b)(3)			
	☐ You are clai	ming federal exemptions.	11 U.S.C. § 522(b)(2)				
2.	For any prope	rty you list on Schedule	A/B that you claim as exe	empt, fill in the information belo	w.		
		n of the property and line or nat lists this property	portion you own Copy the value from	Amount of the exemption you cla Check only one box for each exemption.		Specific laws	that allow exemption
	300 Columbi	ia Drive Unit 1205 Cap	Schedule A/B			Fla Const	art. X, § 4(a)(1);
	Canaveral, F	L 32920 Brevard Cou		\$41,12		Fla. Stat. A	nn. §§ 222.01 &
	Line from Sche	edule A/B: 1.1		100% of fair market value,	•	222.02	

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
\$144,140.00		\$41,123.00	Fla. Const. art. X, § 4(a)(1) Fla. Stat. Ann. §§ 222.01 &
		100% of fair market value, up to any applicable statutory limit	222.02
\$500.00		\$500.00	Fla. Const. art. X, § 4(a)(2)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	Fla. Const. art. X, § 4(a)(2)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	Fla. Stat. Ann. § 222.25(4)
		100% of fair market value, up to any applicable statutory limit	
\$50.00		\$50.00	Fla. Stat. Ann. § 222.25(4)
		100% of fair market value, up to any applicable statutory limit	
	\$500.00 \$500.00	\$500.00	\$144,140.00 \$144,140.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$100% of fair market value, up to any applicable statutory limit

Official Form 106C

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De	carol A Hertenstein			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	jewelry Line from Schedule A/B: 12.1	\$200.00		\$200.00	Fla. Stat. Ann. § 222.25(4)
	Zine nom esticate 772. 1211			100% of fair market value, up to any applicable statutory limit	
	photographic equipment and firearms	\$200.00		\$200.00	Fla. Stat. Ann. § 222.25(4)
	Line from Schedule A/B: 14.1			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$40.00		\$40.00	Fla. Stat. Ann. § 222.25(4)
	Line Holli Schedule PAB. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking Acct No. 0713713347212: Suntrust	\$40.00		\$40.00	Fla. Stat. Ann. § 222.25(4)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	401K: 401K with Orlando Health Fidelity Investments	\$32,000.00		\$32,000.00	Fla. Stat. Ann. § 222.21(2)
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmen	t.)
	Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case?	
	□ No □ Yes				

Ellin del de la forma						
Fill in this informa	ation to identify you	ır case:				
Debtor 1	Carol A Hertens	stein				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	kruptcy Court for the:	MIDDLE DISTRICT OF FLORE	IDA			
Case number (if known)						if this is an led filing
~ <u>-</u>						
Official Form	106D					
Schedule [D: Creditors	Who Have Claims	Secure	d by Propert	У	12/15
		If two married people are filing togetl out, number the entries, and attach it				
1. Do any creditors h	ave claims secured by	y your property?				
☐ No. Check t	his box and submit the	his form to the court with your other	r schedules. Y	ou have nothing else t	o report on this form.	
Yes Fill in a	all of the information	helow		_	·	
		below.				
	Secured Claims			Column A	Column B	Column C
for each claim. If mor	re than one creditor has	more than one secured claim, list the cress a particular claim, list the other creditor cal order according to the creditor's nan	rs in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
	ge Inc/Cenlar	Describe the property that secures	the claim:	\$47,900.00	\$220,000.00	\$47,900.00
Creditor's Name		11024 Windchime Circle Cle	ermont,			
		FL 34711 Lake County				
		This property is under a shoontract.	ort sale			
DO D	40.4	As of the date you file, the claim is:	Check all that			
PO Box 774	-	apply.				
Ewing, NJ		☐ Contingent				
Number, Street, C	City, State & Zip Code	Unliquidated				
Who owes the deb	t? Check one	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as	mortgage or se	cured		
Debtor 2 only		car loan)	o.tgago o. oo.	04.04		
Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the		☐ Judgment lien from a lawsuit				
☐ Check if this clai		Other (including a right to offset)	Second Mo	ortgage		
community debt	t	(
Date debt was incur	red <u>2007</u>	Last 4 digits of account num	nber <u>6820</u>			
2.2 Mazda Cap Services/C		Describe the property that secures	the claim:	\$28,164.00	\$26,000.00	\$2,164.00
Creditor's Name	ilase	2018 Mazda CX5 10000 mile				+ ,
		2010 Mazaa 070 10000 Milio	,,,			
		As of the date you file, the claim is:				
PO Box 780		apply.	Check all that			
Phoenix, A	Z 85062-8069	☐ Contingent				
Number, Street, C	City, State & Zip Code	Unliquidated				
Who owes the deb	t? Check one	☐ Disputed Nature of lien. Check all that apply.				
_	Oncor one.	☐ An agreement you made (such as		cured		
Debtor 1 only		car loan)	origage or set	Ju. 04		
☐ Debtor 2 only ☐ Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien, me	achanic's lion\			
At least one of the	•	☐ Judgment lien from a lawsuit	ionanio a lieni)			
☐ Check if this clai		Other (including a right to offset)	Car Ioan			
community debt		— Outer (including a right to onset)				

Official Form 106D

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Debtor 1 Carol A Hertenstein		Case number (if known)		
First Name Middle N	ame Last Name	-		
Date debt was incurred 9/18	Last 4 digits of account number 04	08		
2.3 Select Portfolio Serv Inc.	Describe the property that secures the claim:	\$220,288.00	\$220,000.00	\$288.00
PO Box 65250 Salt Lake City, UT 84165-0250	11024 Windchime Circle Clermont, FL 34711 Lake County This property is under a short sale contract. As of the date you file, the claim is: Check all the apply. □ Contingent	t t		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage of car loan)	r secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Mortga	ge		
Date debt was incurred 2006	Last 4 digits of account number 92	90		
Wells Fargo Home Mortgage	Describe the property that secures the claim:	\$103,017.00	\$144,140.00	\$0.00
PO Box 105647 Atlanta, GA 30348-5647 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	300 Columbia Drive Unit 1205 Cape Canaveral, FL 32920 Brevard County As of the date you file, the claim is: Check all the apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage of			
Debtor 2 only	car loan)	1 Scource		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	ge		
Date debt was incurred 2015	Last 4 digits of account number 02	64		
Add the dollar value of your entries in C If this is the last page of your form, add Write that number here:	column A on this page. Write that number here: the dollar value totals from all pages.	\$399,369.0 \$399,369.0	_	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 6.19-	DK-01833-CC1 D00	; I Fileu	03/20/19	Page 20 01 52	
Fill in this i	information to identify your	case:				
Debtor 1	Carol A Hertenste	in				
Debior 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing	g) First Name	Middle Name	Last Name			
United State	es Bankruptcy Court for the:	MIDDLE DISTRICT OF FLOR	RIDA			
Case numb (if known)	er				_	theck if this is an mended filing
Official F	Form 106E/F					
		ha Haya Unagayra	d Claima			12/15
		ho Have Unsecured Part 1 for creditors with PRIOR				
Schedule D: (left. Attach th name and cas	Creditors Who Have Claims Sec le Continuation Page to this pag se number (if known).	ired Leases (Official Form 106G). ured by Property. If more space i e. If you have no information to r	s needed, copy	the Part you nee	d, fill it out, number the en	tries in the boxes on the
	ist All of Your PRIORITY Un					
	creditors have priority unsecure	d claims against you?				
_	Go to Part 2.					
☐ Yes.						
Part 2:	ist All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any o	creditors have nonpriority unsec	ured claims against you?				
☐ No. Y	ou have nothing to report in this pa	art. Submit this form to the court wit	h your other sch	edules.		
Yes.						
unsecure	ed claim, list the creditor separately	aims in the alphabetical order of or for each claim. For each claim lists at the other creditors in Part 3.If you	ed, identify what	type of claim it is.	Do not list claims already inc	cluded in Part 1. If more
						Total claim
4.1 Am	nerican Express	Last 4 digits of ac	count number	2000		\$14,806.00
Non	priority Creditor's Name Box 650448	When was the de		2014	_	<u> </u>
	llas, TX 75265-0448	A control to the con-	en a constan			
	nber Street City State Zip Code o incurred the debt? Check one.	As of the date you	u file, the claim	is: Check all that	арріу	
■ [Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and and	other Type of NONPRIC	RITY unsecure	d claim:		
	Check if this claim is for a comr					
deb Is th	t ne claim subject to offset?	☐ Obligations aris		aration agreement	or divorce that you did not	
■ 1	No	☐ Debts to pension	on or profit-sharin	g plans, and othe	r similar debts	
	Yes	Other. Specify	Credit card	purchases		
		poony				_

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Debtor	1 Carol A Hertenstein	Case number (if known)				
4.2	Capital One	Last 4 digits of account number 7288	\$5,957.00			
	Nonpriority Creditor's Name PO Box 60599	When was the debt incurred?				
	City of Industry, CA 91716-0599					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Credit card purchases				
4.3	Capital One	Last 4 digits of account number 9939	\$4,021.00			
	Nonpriority Creditor's Name PO Box 60599	When was the debt incurred?				
	City of Industry, CA 91716-0599	when was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	\square Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit card purchases				
4.4	Capital One	Last 4 digits of account number 2798	\$4,892.00			
	Nonpriority Creditor's Name PO Box 60599	When was the debt incurred?				
	City of Industry, CA 91716-0599	Then was the dest incurred.				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit card purchases				

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Debtor	Carol A Hertenstein	Case number (if known)				
4.5	Community Care Services	Last 4 digits of account number 1265	\$275.00			
	Nonpriority Creditor's Name PO Box 843756	When was the debt incurred?				
	Los Angeles, CA 90084 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	□ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.6	Crescent Bay HOA/Sentry Mgmt	Last 4 digits of account number 0681	\$287.00			
	Nonpriority Creditor's Name 2180 W. SR 434	When was the debt incurred?				
	Longwood, FL 32779 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	,				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify HOA dues				
4.7	Dixie Crossland	Last 4 digits of account number	\$1,462.00			
	Nonpriority Creditor's Name	When was the debt incurred? 2018				
	300 Columbia Drive Unit 2104	When was the debt incurred? 2018				
	Cape Canaveral, FL 32920					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify personal assisted services				
	□ 162	Uther. Specify Personal assisted services				

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Debtor	1 Carol A Hertenstein	Case number (if known)				
4.8	Northern Nevada ER Physician	Last 4 digits of account number	\$1,016.00			
	Nonpriority Creditor's Name PO Box 96408	When was the debt incurred?				
	Oklahoma City, OK 73143					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.9	Orlando Health	Last 4 digits of account number	\$805.00			
	Nonpriority Creditor's Name	When was the debt incurred?				
	PO Box 919936 Orlando, FL 32891-9936	when was the dept incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify medical				
4.1	Renown Health	Last 4 digits of account number 1508	\$17,424.00			
0	Nonpriority Creditor's Name	Last 4 digits of account number 1508	Ψ17,424.00			
	1155 Mill St Reno, NV 89502	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				

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Debtor	1 Carol A F	Hertenstein		Case nu	umber (if known)				
4.1		sland Club HOA	Last 4 digits of account number			\$1,900.00			
	Nonpriority Cre 300 Columi Unit 3105		When was the debt incurred?						
		veral, FL 32920							
		City State Zip Code	As of the date you file, the claim	is: Check	all that apply				
	_	the debt? Check one.	_						
	Debtor 1 on	•	☐ Contingent						
	Debtor 2 on	nly	Unliquidated						
	Debtor 1 an	nd Debtor 2 only	☐ Disputed						
	☐ At least one	e of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
		is claim is for a community	☐ Student loans						
	debt Is the claim su	ubject to offset?	Obligations arising out of a separeport as priority claims	aration ag	reement or divorce that you did not				
	■ No		Debts to pension or profit-sharing	ng plans, a	and other similar debts				
	Yes		Other. Specify HOA						
4.1	Wells Farge	o Bank NA	Last 4 digits of account number	7076		\$5,532.00			
Nonpriority Creditor's Name PO Box 71118 Charlotte, NC 28272-1118			When was the debt incurred?						
	Number Street	City State Zip Code the debt? Check one.	As of the date you file, the claim is: Check all that apply						
	■ Debtor 1 on	ılv	☐ Contingent						
	☐ Debtor 2 on	•	☐ Unliquidated						
	_	nd Debtor 2 only	☐ Disputed						
		e of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
		is claim is for a community	☐ Student loans						
	debt	ubject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	ibject to onset:	☐ Debts to pension or profit-sharing plans, and other similar debts						
	☐ Yes		Other. Specify Credit card	l purch	ases				
Part 3:	-	s to Be Notified About a Debt	•						
is tryi have	ng to collect from	om you for a debt you owe to som	out your bankruptcy, for a debt that leone else, list the original creditor in you listed in Parts 1 or 2, list the add submit this page.	n Parts 1	or 2, then list the collection agency	y here. Similarly, if you			
Part 4:	Add the A	mounts for Each Type of Uns	ecured Claim						
	the amounts of of unsecured cla		s. This information is for statistical I	eporting	purposes only. 28 U.S.C. §159. Add	d the amounts for each			
					Total Claim				
	6a. Total	Domestic support obligations		6a.	\$	-			
cl from F	aims Part 1 6b.	Taxes and certain other debts y	you owe the government	6b.	\$ 0.00				
	6c.	•	jury while you were intoxicated	6c.	\$ 0.00	_			
	6d.	Other. Add all other priority unser	cured claims. Write that amount here.	6d.	\$ 0.00	_			
	6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$0.00	-			
					Total Claim				
	6f.	Student loans		6f.	Total Claim \$0.00	-			
	aims	Obligations arising out of a ser	paration agreement or divorce that	6a.	\$ 0.00				

Official Form 106 E/F

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Debtor 1	Carol A H	ertenstein	Case nu	mber (if known)		
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	58,377.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	58,377.00	

Fill in this infor	Fill in this information to identify your case:							
Debtor 1 Carol A Hertenstein								
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA					
Case number								
(if known)								

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for		
2.1							
	Name						
	Number	Street					
	City		State	ZIP Code	<u> </u>		
2.2							
	Name						
	Number	Street					
	City		State	ZIP Code	_		
2.3	Oity		Olato	Zii Godo			
	Name				_		
	Number	Street			_		
	City		State	ZIP Code	_		
2.4	Oity		Olate	Zii Gode			
	Name				_		
	Number	Street			<u> </u>		
	-						
<u> </u>	City		State	ZIP Code			
2.5							
	Name						
	Number	Street					
	City		State	ZIP Code	<u> </u>		

Official Form 106G

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Fill in this in	formation to identify your	case:			
Debtor 1	Carol A Hertenst	ein			
Dalatano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case numbe	r				
(if known)	·			☐ Check if this	s is an
				amended fi	ling
Official I	Form 106H				
		obtoro			4044
<u>scneau</u>	lle H: Your Cod	eptors			12/15
■ No □ Yes	u have any codebtors? (If		·	e as a codebtor. TY? (Community property states and territories i	include
	California, Idaho, Louisiana				Holdac
_	o to line 3.				
⊔ Yes. [Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in line 2	again as a codebtor only 6D), Schedule E/F (Officia	if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the pe sure you have listed the creditor on Schedu 16G). Use Schedule D, Schedule E/F, or Sche	ıle D (Official
	olumn 1: Your codebtor me, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you ov Check all schedules that apply:	ve the debt
3.1				☐ Schedule D, line	
Na	me			☐ Schedule E/F, line	
				☐ Schedule G, line	
Nu	mber Street			_	
City	у	State	ZIP Code		
3.2				☐ Schedule D, line	
Na	me			☐ Schedule E/F, line	
				☐ Schedule G, line	
Nu	mber Street			_	
City	y	State	ZIP Code		

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Fill	in this information to identify your c	ase:							
Del	otor 1 Carol A Her	tenstein							
	otor 2 puse, if filing)								
Uni	ted States Bankruptcy Court for the	: MIDDLE DISTRICT O	F FLORIDA						
	se number nown)						ed filing	postpetition chapter bwing date:	
0	fficial Form 106l				ī	MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome						12/1	15
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your spo ith you, do not include i	use is linforma	living with ition aboເ	n you, incl It your spo	ude informations. If more	tion about your space is needed,	
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filin	ıg spouse	
	If you have more than one job, attach a separate page with			■ Employed□ Not employed			oyed mployed		
	employers.	Occupation	Disabilty Income						
	Include part-time, seasonal, or self-employed work.	Employer's name	Orlando Health						
	Occupation may include student or homemaker, if it applies.	Employer's address	1414 Kuhl Ave Orlando, FL 32806						
		How long employed to	here? 25 years			_			
Pai	Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to repo	rt for an	y line, writ	e \$0 in the	space. Inclu	de your non-filing	
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information fo	r all em	ployers fo	r that perso	on on the line	s below. If you need	t
					For De	ebtor 1	For Debto		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$2	2,996.80	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3. +	\$	0.00	+\$	N/A	

Calculate gross Income. Add line 2 + line 3.

2,996.80

N/A

Deb	tor 1	Carol A Hertenstein		Case	number (if known)		
				For	Debtor 1		Debtor 2 or filing spouse
	Cop	y line 4 here	4.	\$	2,996.80	\$	N/A
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	508.00	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	<u> </u>	0.00	\$	N/A
	5e.	Insurance	5e.	\$_	63.00	\$	N/A
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A
	5g.	Union dues	5g.	<u> </u>	0.00	\$	N/A
	5h.	Other deductions. Specify: Critical illness	5h.+	· —		+ \$	N/A
	011.	Disability		\$_	17.00	· \$—	N/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	636.00	\$	N/A
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,360.80	\$	N/A
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	\$_ \$_	0.00	\$ \$	N/A N/A
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	8e.	\$_	0.00	\$	N/A
		Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A
	8g.	Pension or retirement income	_ 8g.	\$-	0.00	\$	N/A
	8h.	Other monthly income. Specify:	8h.+	- :	0.00	· -	N/A
_							
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
10	Cald	culate monthly income. Add line 7 + line 9.	10. \$		2,360.80 + \$		N/A = \$ 2,360.80
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	Ľ				
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen	•		•	chedule J. 11. +\$ 0.0 0
12.		I the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain lies					12. \$ 2,360.80
13.	Do y	you expect an increase or decrease within the year after you file this form? No.	?				monthly income

Yes. Explain:

I have become completely physically disabled. My income has dropped to short term disability, and will be immediately qualifying for long term disability which will lower my income.

Fill in this inf	ormation to identify yo	our case:					
Debtor 1	Carol A Hert				Check	c if this is:	
Debtor 2						An amended filing	wing postpetition chapter
(Spouse, if filir	ng)						the following date:
United States	Bankruptcy Court for the	: MIDDL	E DISTRICT OF FLORIDA		1	MM / DD / YYYY	
Case number (If known)							
Official	Form 106J			l			
	ule J: Your						12/
information		eded, atta	. If two married people ar ich another sheet to this n.				
	Describe Your House a joint case?	hold					
■ No.	Go to line 2. Does Debtor 2 live	in a separ	ate household?				
	☐ No ☐ Yes. Debtor 2 mus	st file Offic	al Form 106J-2, <i>Expenses</i>	for Separate Housel	hold of Debto	or 2.	
2. Do yo u	have dependents?	■ No					
Do not Debtor	list Debtor 1 and 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do not	state the						□ No
depend	lents names.						☐ Yes
							□ No □ Yes
							□ No
							☐ Yes
							□ No
0							☐ Yes
expens	r expenses include ses of people other t	han _	No Yes				
yourse	If and your depende	nts?	163				
Estimate yo	s of a date after the	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
	such assistance an		government assistance i cluded it on <i>Schedule I:</i>)			Your exp	enses
4. The rer	•		ses for your residence. I	nclude first mortgage	4. \$		1,034.00
. ,	ncluded in line 4:						
	Real estate taxes				4a. \$		0.00
	Property, homeowner's	s, or renter	's insurance		4a. \$		0.00
	lome maintenance, re				4c. \$		250.00
	lomeowner's associat				4d. \$		400.00
5. Additio	nal mortgage payme	ents for ye	our residence, such as ho	me equity loans	5. \$		0.00

Debtor 1	Carol	A Hertenstein	Case num	ber (if known)	
6. Uti l	lities:				
6a.		city, heat, natural gas	6a.	\$	100.00
6b.	Water,	sewer, garbage collection	6b.	\$	0.00
6c.	Teleph	one, cell phone, Internet, satellite, and cable services	6c.	\$	76.00
6d.	Other.	Specify:	6d.	\$	0.00
. Foo	od and ho	pusekeeping supplies	7.	\$	500.00
. Chi	ildcare ar	nd children's education costs	8.	\$	0.00
Clo	othing, lau	undry, and dry cleaning	9.	\$	50.00
	•	re products and services	10.	\$	50.00
l. Me	dical and	dental expenses	11.	\$	100.00
. Tra	ansportati	ion. Include gas, maintenance, bus or train fare.			
		le car payments.	12.	\$	250.00
B. Ent	tertainme	nt, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
. Ch	aritable c	ontributions and religious donations	14.	\$	0.00
. Ins	urance.	-			
Do	not includ	le insurance deducted from your pay or included in lines 4 or 20.			
15a	a. Life ins	surance	15a.	\$	0.00
15b	o. Health	insurance	15b.	\$	0.00
150	c. Vehicle	e insurance	15c.	\$	95.00
150	d. Other i	insurance. Specify:	15d.	\$	0.00
. Tax	xes. Do no	ot include taxes deducted from your pay or included in lines 4 or 20.			
	ecify:		16.	\$	0.00
		or lease payments:			
17a	a. Car pa	yments for Vehicle 1	17a.	\$	431.00
17b	o. Car pa	yments for Vehicle 2	17b.	\$	0.00
170	c. Other.	Specify:	17c.	\$	0.00
170	d. Other.	Specify:	17d.	\$	0.00
		nts of alimony, maintenance, and support that you did not report as			0.00
		om your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
		ents you make to support others who do not live with you.		\$	0.00
	ecify:		19.		
		roperty expenses not included in lines 4 or 5 of this form or on Scho			
	_	ages on other property	20a.		0.00
20b	o. Real e	state taxes	20b.	\$	0.00
200	c. Proper	ty, homeowner's, or renter's insurance	20c.	\$	0.00
200	d. Mainte	nance, repair, and upkeep expenses	20d.	\$	0.00
20€	e. Homed	owner's association or condominium dues	20e.	\$	0.00
. Oth	h er: Speci	fy:	21.	+\$	0.00
0-1	lavdata va				
	•	our monthly expenses		<u></u>	2 222 22
		es 4 through 21.		\$	3,386.00
220	o. Copy lin	e 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	c. Add line	22a and 22b. The result is your monthly expenses.		\$	3,386.00
Cal	lculate vo	our monthly net income.			
	-	ine 12 (your combined monthly income) from Schedule I.	23a.	\$	2,360.80
		our monthly expenses from line 22c above.	23a. 23b.		3,386.00
231	э. Сору у	rout monthly expenses non-line 220 above.	۷۵۵.	-ψ	3,380.00
230	s Subtra	ct your monthly expenses from your monthly income.			
230		sult is your <i>monthly net income</i> .	23c.	\$	-1,025.20
				-	
		ect an increase or decrease in your expenses within the year after yo			
		lo you expect to finish paying for your car loan within the year or do you expect you	r mortgage	payment to increase	e or decrease because of a
		the terms of your mortgage?			
	No.				
	Yes.	Explain here:			
		· · · · · · · · · · · · · · · · · · ·			

Fill in this infor	mation to identify your	case:					
Debtor 1	Carol A Hertenste	ein					
Dahtano	First Name	Middle Name	Las	t Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Las	t Name			
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA				
Case number							
(if known)						☐ Check if this is amended filing	
Official Forr	m 106Dec						
Declarat	tion About a	n Individual	Debte	or's Sche	edules		12/15
		, both are equally respon					
obtaining mone		n connection with a bank				ement, concealing prope 00, or imprisonment for t	
years, or both. I	10 0.5.0. 99 152, 1541, 1	519, and 5571.					
Sig	n Below						
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help	you fill out bank	ruptcy forms?		
■ No							
☐ Yes.	Name of person					kruptcy Petition Preparer's n, and Signature (Official F	
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and s	chedules filed wi	th this declarati	on and	
X /s/ Car	rol A Hertenstein		х				
	A Hertenstein ure of Debtor 1			Signature of Deb	tor 2		
Date	March 26, 2019			Date			

Official Form 106Dec

Fill	in this information to	identify your	case:			
		A Hertenst				
	First Na		Middle Name	Last Name		
	otor 2 use if, filing) First Na	me	Middle Name	Last Name		
` .	ted States Bankruptcy		MIDDLE DISTRICT OF F			
01111	led States Bankruptcy	Court for tile.	WIDDLE DIOTRIOT OF T	LONIDA		
Cas (if kn	se number own)				-	check if this is an mended filing
Sta Be a	s complete and accu	nancial A	ole. If two married people a		ankruptcy equally responsible for sup	
num	ber (if known). Answ	er every ques	tion.	·	y additional pages, write you	ir name and case
Par 1.	Give Details Al What is your current		rital Status and Where You s?	I Lived Before		
	☐ Married■ Not married					
2.	During the last 3 year	rs, have you l	ived anywhere other than	where you live now?		
	■ No □ Yes. List all of the	e places you liv	ved in the last 3 years. Do n	ot include where you live now	<i>ı</i> .	
	Debtor 1 Prior Addr	ess:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Make sure y	ou fill out <i>Sch</i>	edule H: Your Codebtors (O	fficial Form 106H).		
Par	Explain the So	urces of Your	Income			
4.	Fill in the total amount	of income you	received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No■ Yes. Fill in the de	etails.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	m January 1 of curre date you filed for bar		■ Wages, commissions, bonuses, tips	\$11,987.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Ca	arol A Hertenstein	Case number (if known)				
		Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a	pply. (befor	s income re deductions xclusions)
		■ Wages, commissions, bonuses, tips	\$75,425.00	☐ Wages, com bonuses, tips	missions,	
		☐ Operating a business		☐ Operating a	business	
	dar year before that: December 31, 2017)	■ Wages, commissions, bonuses, tips	\$74,660.00	☐ Wages, com bonuses, tips	missions,	
		☐ Operating a business		☐ Operating a	business	
■ No	source and the gross inc	Debtor 1 Sources of income Describe below.	Gross income from each source	Debtor 2 Sources of inc Describe below.	ome Gross	s income re deductions
			(before deductions and exclusions)		and e	xclusions)
Part 3: Lis	t Certain Payments You	u Made Before You Filed for I	Bankruptcy			
6. Are eithe □ No.	Neither Debtor 1 nor individual primarily for	2's debts primarily consumer Debtor 2 has primarily consu a personal, family, or househol	imer debts. Consumer debt d purpose."			incurred by an
	_	fore you filed for bankruptcy, did	d you pay any creditor a tota	I of \$6,425* or moi	re?	
	☐ Yes List below paid that contincted	each creditor to whom you paid creditor. Do not include paymen e payments to an attorney for the	its for domestic support oblig his bankruptcy case.	gations, such as ch	nild support and alimo	
	* Subject to adjustmer	nt on 4/01/19 and every 3 years	s after that for cases filed on	or after the date of	f adjustment.	
■ Yes.		or both have primarily consu fore you filed for bankruptcy, did		I of \$600 or more?	,	
	☐ No. Go to line	7.				
	include pa	each creditor to whom you paid yments for domestic support of or this bankruptcy case.				
Creditor	's Name and Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this payment	for
Mazda Capital Services/Chase PO Box 78069 Phoenix, AZ 85062-8069		ase From Nov 201 Jan 2019	8 to \$1,293.00	\$0.00	☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repaymer ☐ Suppliers or ver	

Debtor 1 Carol A Hertenstein

Case number (if known)

Creditor's Name and Address	Dates of payment Total amount paid		Amount you still owe					
American Express PO Box 650448 Dallas, TX 75265-0448	From Nov 2018 to Dec 2018	\$800.00	\$0.00	 ☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other 				
Capital One PO Box 60599 City of Industry, CA 91716-0599	From Nov 2018 to Dec 2018 to acct 9939	\$260.00	\$0.00	 ☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other 				
Capital One PO Box 60599 City of Industry, CA 91716-0599	Nov 2018 to acct no. 2798	\$140.00	\$0.00	 ☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other 				
Capital One PO Box 60599 City of Industry, CA 91716-0599	nov 2018 to acct no. 7288	\$180.00	\$0.00	 ☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other 				
Wells Fargo PO Box 14517 Des Moines, IA 50306	nov 2018	\$102.00	\$0.00	 ☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other 				
Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.								
■ No□ Yes. List all payments to an insider.								
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment				
Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.								
Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment				
more o Hame and Address	Dates of payment	paid	still owe	Include creditor's name				

7.

8.

Deb	otor 1 _C	Carol A Hertenstein		Case number	(if known)			
Par	t 4: Id	entify Legal Actions, Repossession	s. and Foreclosures					
	-							
9.	List all s	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.						
	■ No □ Yes	s. Fill in the details.						
	Case ti Case n		Nature of the case	Court or agency	Status of th	ne case		
(Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11.							
	☐ Yes	s. Fill in the information below.						
	Credito	or Name and Address	Describe the Property		Date	Value of the property		
			Explain what happened			,		
11.	account No	00 days before you filed for bankrup ts or refuse to make a payment becans. Fill in the details.		uding a bank or financial ins	titution, set off any a	amounts from your		
	Credito	or Name and Address	Describe the action the	creditor took	Date action was taken	Amount		
12.		l year before you filed for bankruptc opointed receiver, a custodian, or ar		rty in the possession of an a	assignee for the ben	efit of creditors, a		
Par	t 5: Li	st Certain Gifts and Contributions						
13.	□ No	2 years before you filed for bankrupt	cy, did you give any gifts	with a total value of more the	nan \$600 per person	?		
		s. Fill in the details for each gift.						
	per per		Describe the gifts		Dates you gave the gifts	Value		
	Person to Whom You Gave the Gift and Address:							
	ASPC	A	\$50			\$50.00		
	Person'	's relationship to you: none						
14.	Within 2	Nithin 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No						
	☐ Yes							
	more the	r contributions to charities that tota nan \$600 r's Name is (Number, Street, City, State and ZIP Code)	Describe what you	contributed	Dates you contributed	Value		

Debtor 1 Carol A Hertenstein				Case number (if known)				
Par	t 6:	List Certain Losses						
15.		n 1 year before you filed for bankru mbling?	iptcy or	since you filed for bankruptcy, did y	you lose any	thing because of the	ft, fire, other disaster,	
		No						
	□ Y	es. Fill in the details.						
		ribe the property you lost and the loss occurred	Include	the amount that insurance has paid. It ce claims on line 33 of Schedule A/B:	_ist pending	Date of your loss	Value of property lost	
Par	t 7:	List Certain Payments or Transfer	s					
16.	Includ	ulted about seeking bankruptcy or le any attorneys, bankruptcy petition	preparin	d you or anyone else acting on your g a bankruptcy petition? s, or credit counseling agencies for ser			rty to anyone you	
		es. Fill in the details.				_		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You			Description and value of any property transferred		Date payment or transfer was made	Amount of payment	
	Rumberger Kirk & Caldwell 300 S. Orange Ave 14th Floor Orlando, FL 32801			ge Ave bankruptcy			\$2,500.00	
17.	promi		ditors or	d you or anyone else acting on your to make payments to your creditor ed on line 16.		or transfer any prope	rty to anyone who	
	_	No /es. Fill in the details.						
		on Who Was Paid		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment	
18.	Includinclude	ferred in the ordinary course of yo	u r busin e s made a	is security (such as the granting of a s				
		on Who Received Transfer		Description and value of	Describe	any property or	Date transfer was	
	Addr			property transferred		received or debts	made	
19.	Withir benef	• •		did you transfer any property to a son devices.)	self-settled tro	ust or similar device		
	Name	e of trust		Description and value of the prop	erty transferr	red	Date Transfer was made	

Par 20.	List of Certain Financial Accounts, Within 1 year before you filed for bankrup sold, moved, or transferred? Include checking, savings, money marke	otcy, were any financial	accounts or instr	uments held in your name, or f	-
	houses, pension funds, cooperatives, as				redit amons, proterage
	■ Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	unt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Wells Fargo PO Box 14517 Des Moines, IA 50306	xxxx-	☐ Checking ■ Savings ☐ Money Mai ☐ Brokerage ☐ Other		\$100.00
	Wells Fargo PO Box 14517 Des Moines, IA 50306	xxxx-	■ Checking □ Savings □ Money Mat □ Brokerage □ Other	rket	\$20.00
21.	Do you now have, or did you have within cash, or other valuables?	1 year before you filed	for bankruptcy, a	ny safe deposit box or other de	pository for securities,
	■ No				
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code	Who else had a Address (Numbe State and ZIP Code	er, Street, City,	Describe the contents	Do you still have it?
22.	Have you stored property in a storage un ■ No	it or place other than yo	our home within 1	year before you filed for bankr	uptcy?
	☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code		er, Street, City,	Describe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Cont	rol for Someone Else			
23.	Do you hold or control any property that for someone. No Yes. Fill in the details.	someone else owns? Ir	nclude any proper	ty you borrowed from, are stor	ing for, or hold in trust
	LI Tes. Fill in the details.				

Debtor 1 Carol A Hertenstein

Part 10: Give Details About Environmental Information

Case number (if known)

For	the	purpose of Part 10, the following definiti	ions	apply:								
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.											
		e means any location, facility, or propert	-	•	law,	whether you now own, operate, o	or utilize it or used					
		zardous material means anything an env ardous material, pollutant, contaminant			wa	ste, hazardous substance, toxic s	substance,					
Rep	ort a	all notices, releases, and proceedings th	at yo	u know about, regardless of wher	the	ey occurred.						
24.	Has	s any governmental unit notified you tha	t you	may be liable or potentially liable	und	der or in violation of an environme	ental law?					
		No Yes. Fill in the details.										
		me of site Idress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice					
25.	Hav	Have you notified any governmental unit of any release of hazardous material?										
		No Yes. Fill in the details.										
		me of site Idress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.											
		No Yes. Fill in the details.										
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case					
Pai	t 11:	Give Details About Your Business or	Coni	nections to Any Business								
27.	Wit	hin 4 years before you filed for bankrupt	tcy, c	lid you own a business or have an	y of	the following connections to any	business?					
		☐ A sole proprietor or self-employed i	in a t	rade, profession, or other activity,	eith	ner full-time or part-time						
		☐ A member of a limited liability comp	oany	(LLC) or limited liability partnersh	ip (l	LP)						
	☐ A partner in a partnership											
	☐ An officer, director, or managing executive of a corporation											
		☐ An owner of at least 5% of the votin	g or	equity securities of a corporation								
		No. None of the above applies. Go to I	Part 1	12.								
		Yes. Check all that apply above and fill	l in th	ne details below for each business	S .							
		isiness Name Idress	Des	scribe the nature of the business		Employer Identification number Do not include Social Security						

Name of accountant or bookkeeper

(Number, Street, City, State and ZIP Code)

Dates business existed

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Debto	or 1 Carol A Hertenstein		Case number (if known)
	Nithin 2 years before you filed for bankru nstitutions, creditors, or other parties.	otcy, did you give a financial statement to	anyone about your business? Include all financial
I [■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Part '	12: Sign Below		
vith a	ue and correct. I understand that making a bankruptcy case can result in fines up to S.C. §§ 152, 1341, 1519, and 3571.		r obtaining money or property by fraud in connection years, or both.
	ol A Hertenstein ature of Debtor 1	Signature of Debtor 2	
Date	March 26, 2019	Date	
Did yo	ou attach additional pages to Your Staten	nent of Financial Affairs for Individuals Fi	ling for Bankruptcy (Official Form 107)?
No			
∃Ye	s		
Did yo	ou pay or agree to pay someone who is n	ot an attorney to help you fill out bankrup	etcy forms?
■ No	1		

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify you	ur case:		
Debtor 1	Carol A Hertens	stein		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the	: MIDDLE DISTRICT OF	FLORIDA	
Case number _				
(if known)				Check if this is an amended filing
Official Fo				_
Statamai	nt of Intenti	on for Individu	ıals Filing Under Chapte	r 7 12/15

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:	List Your	Creditors	Who Have	Secured	Claims
---------	-----------	-----------	----------	---------	--------

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?		
Creditor's Citimortgage Inc/Cenlar	■ Surrender the property.	■ No		
Description of property Clermont, FL 34711 Lake County This property is under a short sale contract.	 ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	☐ Yes		
Creditor's Mazda Capital Services/Chase	■ Surrender the property.	■ No		
name: Description of property securing debt: 2018 Mazda CX5 10000 miles	 ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	☐ Yes		
Creditor's Select Portfolio Serv Inc.	■ Surrender the property. □ Retain the property and redeem it.	■ No		
Description of 11024 Windchime Circle	☐ Retain the property and redeem it. ☐ Retain the property and enter into a *Reaffirmation Agreement.*	☐ Yes		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Car	ol A Hertenstein	Case number (if known	
property securing debt	Clermont, FL 34711 Lake County This property is under a short sale contract.	☐ Retain the property and [explain]:	_
Creditor's \ name:	Wells Fargo Home Mortgage	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt	Cape Canaveral, FL 32920	■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	■ Yes
For any unexpir in the information	on below. Do not list real estate leases. I	s ed in Schedule G: Executory Contracts and Unexpire Jnexpired leases are leases that are still in effect; th if the trustee does not assume it. 11 U.S.C. § 365(p)(e lease period has not yet ended.
Describe your	unexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of le	eased		□ No
Property:			☐ Yes
Lessor's name: Description of le Property:	pased		□ No
r roperty.			☐ Yes
Lessor's name: Description of le	nased		□ No
Property:	aseu		☐ Yes
Lessor's name:			□ No
Description of le Property:	ased		☐ Yes
Lessor's name:			□ No
Description of le Property:	eased		☐ Yes
Lessor's name:			□ No
Description of le Property:	eased		☐ Yes
Lessor's name:			□ No
Description of le Property:	eased		☐ Yes
Part 3: Sign	Below		
	of perjury, I declare that I have indicated subject to an unexpired lease.	my intention about any property of my estate that se	ecures a debt and any personal
X /s/ Carol	A Hertenstein	X	
Carol A H	Hertenstein of Debtor 1	Signature of Debtor 2	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Carol A Hertenstein		Case number (if known)	
Date	March 26, 2019	Date		

Fill in this i	nformation to identify your case:					irected in this form an	d in Form
Debtor 1	Carol A Hertenstein		1	22A-1Supp):		
Debtor 2 (Spouse, if filir				■ 1. The	re is no pres	umption of abuse	
United Sta	tes Bankruptcy Court for the: Middle District of I	Florida		app	olies will be n	o determine if a presunade under <i>Chapter 7</i> icial Form 122A-2).	•
Case numb (if known)	oer			☐ 3. The	Means Test	does not apply now by service but it could a	
				☐ Chec	k if this is a	n amended filing	
Official	Form 122A - 1					3	
Chapt	er 7 Statement of Your Cur	rent Mor	nthly In	come			12/1
attach a sep case numbe qualifying m Part 1:	ete and accurate as possible. If two married people a arate sheet to this form. Include the line number to v r (if known). If you believe that you are exempted froi ilitary service, complete and file Statement of Exemp Calculate Your Current Monthly Income is your marital and filing status? Check one or at married. Fill out Column A, lines 2-11.	which the addition m a presumption otion from Presum	nal information of abuse beca	applies. Or use you do	n the top of a not have prir	ny additional pages, wr narily consumer debts	ite your name and or because of
	arried and your spouse is filing with you. Fill o	ut both Columns	A and B, line	s 2-11.			
_	arried and your spouse is NOT filing with you.						
	Living in the same household and are not lega	ally separated.	Fill out both C	olumns A a	and B, lines 2	2-11.	
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evading.	egally separated	d under nonba	nkruptcy la	aw that appli	es or that you and you	
101(10A) the 6 mor	e average monthly income that you received from all . For example, if you are filing on September 15, the 6-m oths, add the income for all 6 months and divide the total fown the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 thr sult. Do not incl	ough August ude any inco	t 31. If the amo	ount of your monthly incorore than once. For example	me varied during ple, if both
				Column Debtor		Column B Debtor 2 or non-filing spouse	
	gross wages, salary, tips, bonuses, overtime, ll deductions).	and commission	ons (before al	¹ \$	0.00	\$	
	ony and maintenance payments. Do not include nn B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you from a and ro	nounts from any source which are regularly pa u or your dependents, including child support an unmarried partner, members of your household commates. Include regular contributions from a sp n. Do not include payments you listed on line 3.	 Include regular your depender 	contributions nts, parents,		0.00	\$	
	ncome from operating a business, profession,						
_			otor 1				
	receipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
	ary and necessary operating expenses northly income from a business, profession, or far		Copy here -	> \$	0.00	\$	
	ncome from rental and other real property	Ψ	.,			·	
			otor 1				
Gross	receipts (before all deductions)	\$ 0.00					
	ary and necessary operating expenses	-\$ 0.00		•			
Net m	onthly income from rental or other real property	\$	Copy here -		0.00	\$	
7. Intere	est, dividends, and royalties			\$	0.00	Ψ	

Official Form 122A-1

Debtor 1	С	arol	A Hertenstein			Case numbe	r (<i>if known</i>)			
						Column A Debtor 1		Column E Debtor 2 non-filing	_	
8. U	Inemi	plovr	ment compensation			\$	0.00	\$	0 1	
D	o not	ente	r the amount if you contend that the amoun Security Act. Instead, list it here:	received was a benef	it under	· 	0.00			
	For	you	\$	0.0	00					
	For	your	spouse \$							
	ensio	on or	retirement income. Do not include any aner the Social Security Act.	nount received that wa	s a	\$	0.00	\$		
D re d	o not	inclued as tic te	m all other sources not listed above. Speade any benefits received under the Social Sa victim of a war crime, a crime against hur rrorism. If necessary, list other sources on a	Security Act or paymen manity, or international	ts or					
						\$	0.00	\$		
						\$	0.00	\$		
		To	tal amounts from separate pages, if any.		+	\$	0.00	\$		
			rour total current monthly income. Add lir n. Then add the total for Column A to the to		\$	0.00	+ \$_		=\$_	0.00
									Total	current monthly
									incon	
Part 2	:	Dete	ermine Whether the Means Test Applies t	o You						
12 C	alcul	late v	our current monthly income for the year	Follow these steps:						
		-				Con	v lina 11 l	noro->	¢	0.00
1	2a. C	ору у	our total current monthly income from line	· I		Сор	y iiile i i i	iere=>	• —	0.00
	M	Iultinl	y by 12 (the number of months in a year)							12
1	2b. Tl	he re	sult is your annual income for this part of th	e form				12	^{2b.} \$	0.00
13. C	alcul	ate t	he median family income that applies to	vou. Follow these step	os:					
Г	III IN U	ne st	ate in which you live.	FL						
F	ïll in tl	he nı	umber of people in your household.	1						
			edian family income for your state and size							48,000.00
Т	o find	l a lis	t of applicable median income amounts, go This list may also be available at the bank	online using the link sp	pecified	in the separa	ate instruc		3. \[\\$	40,000.00
14. H	low d	lo the	e lines compare?							
1	4a.		Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	eck box	1, There is	no presun	nption of ab	use.	
1	4b.		Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The pro	esumption o	f abuse is	determined	by Form 1	22A-2.
Part 3	:	Sign	Below							
	B	y sigi	ning here, I declare under penalty of perjury	that the information or	n this sta	atement and	in any att	achments is	s true and o	correct.
	v	1-1	Canal A Hautanatain							
	X	Car	Carol A Hertenstein rol A Hertenstein nature of Debtor 1							
	Date	Mai	rch 26, 2019							
	lf		checked line 14a, do NOT fill out or file Forr	n 122A-2.						
		•	checked line 14h fill out Form 122A-2 and f							

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	:	Liquidation
\$2	45	filing fee
\$	75	administrative fee
+ \$	15	trustee surcharge
\$3	35	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

re	Carol A Hertenstein		Case No.	
		Debtor(s)	Chapter	7
		FICATION OF CREDITOR		
abo	ove-named Deotor nereby verifies t	hat the attached list of creditors is true and	correct to the best	of his/her knowledge.
te:	March 26, 2019	/s/ Carol A Hertenstein		
		Carol A Hertenstein		

Signature of Debtor

Carol A Hertenstein 300 Columbia Drive Unit 1205 Cape Canaveral, FL 32920 Northern Nevada ER Physician PO Box 96408 Oklahoma City, OK 73143

Lan Kennedy-Davis, Esq. Rumberger Kirk & Caldwell, P.A. 300 S, Orange Ave 14th Floor Orlando, FL 32801 Orlando Health PO Box 919936 Orlando, FL 32891-9936

American Express PO Box 650448 Dallas, TX 75265-0448 Renown Health 1155 Mill St Reno, NV 89502

Capital One PO Box 60599 City of Industry, CA 91716-0599 Select Portfolio Serv Inc. PO Box 65250 Salt Lake City, UT 84165-0250

Citimortgage Inc/Cenlar PO Box 77404 Ewing, NJ 08628 Treasure Island Club HOA 300 Columbia Dr Unit 3105 Cape Canaveral, FL 32920

Community Care Services PO Box 843756 Los Angeles, CA 90084 Wells Fargo Bank NA PO Box 71118 Charlotte, NC 28272-1118

Crescent Bay HOA/Sentry Mgmt 2180 W. SR 434 Longwood, FL 32779 Wells Fargo Home Mortgage PO Box 105647 Atlanta, GA 30348-5647

Dixie Crossland 300 Columbia Drive Unit 2104 Cape Canaveral, FL 32920

Mazda Capital Services/Chase PO Box 78069 Phoenix, AZ 85062-8069 B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

	14	riddic District of Florida			
In re	Carol A Hertenstein	Debtor(s)	Case No. Chapter	7	
		Debtor(s)	Chapter		
	DISCLOSURE OF COMPI	ENSATION OF ATTOR	NEY FOR DI	EBTOR(S)	
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the file of rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy, of	or agreed to be paid	to me, for services rend	lered or to
	For legal services, I have agreed to accept		\$	2,165.00	
	Prior to the filing of this statement I have received	d	\$	2,165.00	
	Balance Due		\$	0.00	
2. 1	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. 1	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. I	■ I have not agreed to share the above-disclosed con	npensation with any other person u	inless they are mem	bers and associates of n	ny law firm.
I	☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n				firm. A
5. 1	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	of the bankruptcy of	ase, including:	
b c	a. Analysis of the debtor's financial situation, and ren b. Preparation and filing of any petition, schedules, st c. Representation of the debtor at the meeting of cred d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicat 522(f)(2)(A) for avoidance of liens on h	atement of affairs and plan which iters and confirmation hearing, and preduce to market value; exertions as needed; preparation as	may be required; I any adjourned hea mption planning;	rings thereof;	ing of
6. E	By agreement with the debtor(s), the above-disclosed in Representation of the debtors in any of any other adversary proceeding.			es, relief from stay a	actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of a ankruptcy proceeding.	any agreement or arrangement for p	payment to me for r	epresentation of the deb	otor(s) in
	arch 26, 2019	/s/ Lan Kennedy-D			
Date		Lan Kennedy-Dav Signature of Attorney			
		Rumberger Kirk &	Caldwell, P.A.		
		300 S, Orange Ave 14th Floor	9		
		Orlando, FL 32801			
		407-839-4576 Fax			
		<u>Ikennedy@rumber</u> Name of law firm	rger.com		_
		z.ae oj tem jum			